

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:)

RAVI SHAM PANJABI, M.D.)

Case No. 800-2014-003236

**Physician's and Surgeon's)
Certificate No. A 55600)**

Respondent)

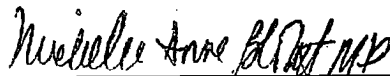
DECISION

The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 22, 2017.

IT IS SO ORDERED: October 23, 2017.

MEDICAL BOARD OF CALIFORNIA



**Michelle Anne Bholat, M.D., Chair
Panel B**

1 XAVIER BECERRA
Attorney General of California
2 JANE ZACK SIMON
Supervising Deputy Attorney General
3 GREG W. CHAMBERS
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8 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
9 **STATE OF CALIFORNIA**

10 In the Matter of the Accusation Against:

11 **RAVI SHAM PANJABI, M.D.**
12 **19850 Lake Chabot Road**
13 **Castro Valley, CA 94546**

14 **Physician's and Surgeon's Certificate No.**
A55600

15 Respondent.

Case No. 800-2014-003236

OAH No. 2017060612

STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER

16
17 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
18 entitled proceedings that the following matters are true:

19 **PARTIES**

20 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
21 of California (Board). She brought this action solely in her official capacity and is represented in
22 this matter by Xavier Becerra, Attorney General of the State of California, by Greg W. Chambers,
23 Deputy Attorney General.

24 2. Respondent Ravi Sham Panjabi, M.D. (Respondent) is represented in this proceeding
25 by attorney John Fleer, whose address is: 1850 Mt. Diablo Blvd., Ste. 120
26 Walnut Creek, CA 94596

27 3. On or about January 31, 1996, the Board issued Physician's and Surgeon's Certificate
28 No. A55600 to Ravi Sham Panjabi, M.D. (Respondent). Said certificate was revoked, and the

1 revocation stayed, and Respondent was placed on five (5) years' probation, effective May 4,
2 2017. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to
3 the charges brought in Accusation No. 800-2014-003236, and will expire on October 31, 2017,
4 unless renewed.

5 JURISDICTION

6 4. Accusation No. 800-2014-003236 was filed before the Board, and is currently
7 pending against Respondent. The Accusation and all other statutorily required documents were
8 properly served on Respondent on February 10, 2017. Respondent timely filed his Notice of
9 Defense contesting the Accusation.

10 5. A copy of Accusation No. 800-2014-003236 is attached as exhibit A and incorporated
11 herein by reference.

12 ADVISEMENT AND WAIVERS

13 6. Respondent has carefully read, fully discussed with counsel, and understands the
14 charges and allegations in Accusation No. 800-2014-003236. Respondent has also carefully read,
15 fully discussed with counsel, and understands the effects of this Stipulated Settlement and
16 Disciplinary Order.

17 7. Respondent is fully aware of his legal rights in this matter, including the right to a
18 hearing on the charges and allegations in the Accusation; the right to confront and cross-examine
19 the witnesses against him; the right to present evidence and to testify on his own behalf; the right
20 to the issuance of subpoenas to compel the attendance of witnesses and the production of
21 documents; the right to reconsideration and court review of an adverse decision; and all other
22 rights accorded by the California Administrative Procedure Act and other applicable laws.

23 8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
24 every right set forth above.

25 CULPABILITY

26 9. Respondent understands and agrees that the charges and allegations in Accusation
27 No. 800-2014-003236, if proven at a hearing, constitute cause for imposing discipline upon his
28 Physician's and Surgeon's Certificate.

10. For the purpose of resolving the Accusation without the expense and uncertainty of further proceedings, Respondent agrees that, at a hearing, Complainant could establish a factual basis for the charges in the Accusation, and that Respondent hereby gives up his right to contest those charges.

11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

14. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A55600 issued to Respondent Ravi Sham Panjabi, M.D. is revoked. However, the revocation is stayed and Respondent's existing five (5) year probation, which became effective May 4, 2017, is hereby

1 extended for an additional one (1) year on the following terms and conditions:¹

2 1. EDUCATION COURSE. Within sixty (60) calendar days of the effective date of the
3 Decision, and on an annual basis thereafter, Respondent shall submit to the Board or its designee
4 for its prior approval educational program(s) or course(s) which shall not be less than forty (40)
5 hours per year, for each year of probation. The educational program(s) or course(s) shall be
6 aimed at correcting any areas of deficient practice or knowledge and shall be Category I certified.
7 The educational program(s) or course(s) shall be at Respondent's expense and shall be in addition
8 to the Continuing Medical Education (CME) requirements for renewal of licensure. Following
9 the completion of each course, the Board or its designee may administer an examination to test
10 Respondent's knowledge of the course. Respondent shall provide proof of attendance for sixty-
11 five (65) hours of CME of which 40 hours were in satisfaction of this condition.

12 2. MEDICAL RECORD KEEPING COURSE. Within sixty (60) calendar days of the
13 effective date of this Decision, Respondent shall enroll in a course in medical record keeping
14 approved in advance by the Board or its designee. Respondent shall provide the approved course
15 provider with any information and documents that the approved course provider may deem
16 pertinent. Respondent shall participate in and successfully complete the classroom component of
17 the course not later than six (6) months after Respondent's initial enrollment. Respondent shall
18 successfully complete any other component of the course within one (1) year of enrollment. The
19 medical record keeping course shall be at Respondent's expense and shall be in addition to the
20 Continuing Medical Education (CME) requirements for renewal of licensure.

21 A medical record keeping course taken after the acts that gave rise to the charges in the
22 Decision, but prior to the effective date of the Decision may, in the sole discretion of the Board or
23 its designee, be accepted towards the fulfillment of this condition if the course would have been
24 approved by the Board or its designee had the course been taken after the effective date of this
25 Decision.

26
27 ¹ The terms and conditions are applicable only to the extent that Respondent has not
28 already complied with the terms and conditions of his current five (5) years' probation as defined
in Medical Board of California Decision 03-2013-229400.

1 Respondent shall submit a certification of successful completion to the Board or its
2 designee not later than fifteen (15) calendar days after successfully completing the course, or not
3 later than 15 calendar days after the effective date of the Decision, whichever is later.

4 3. PROFESSIONALISM PROGRAM (ETHICS COURSE). Within sixty (60) calendar
5 days of the effective date of the Decision, Respondent shall enroll in a professionalism program,
6 that meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.
7 Respondent shall participate in and successfully complete that program. Respondent shall
8 provide any information and documents that the program may deem pertinent. Respondent shall
9 successfully complete the classroom component of the program not later than six (6) months after
10 Respondent's initial enrollment, and the longitudinal component of the program not later than the
11 time specified by the program, but no later than one (1) year after attending the classroom
12 component. The professionalism program shall be at Respondent's expense and shall be in
13 addition to the CME requirements for renewal of licensure.

14 A professionalism program taken after the acts that gave rise to the charges in the
15 Accusation, but prior to the effective date of the Decision of that matter may, in the sole
16 discretion of the Board or its designee, be accepted towards the fulfillment of this condition if the
17 program would have been approved by the Board or its designee had the program been taken after
18 the effective date of this Decision.

19 Respondent shall submit a certification of successful completion to the Board or its
20 designee not later than fifteen (15) calendar days after successfully completing the program or not
21 later than fifteen (15) calendar days after the effective date of the Decision, whichever is later.

22 4. CLINICAL COMPETENCE ASSESSMENT PROGRAM. Within sixty (60)
23 calendar days of the effective date of the Decision, Respondent shall enroll in a clinical
24 competence assessment program approved in advance by the Board or its designee. Respondent
25 shall successfully complete the program not later than six (6) months after Respondent's initial
26 enrollment unless the Board or its designee agrees in writing to an extension of that time.

27 The program shall consist of a comprehensive assessment of Respondent's physical and
28 mental health and the six general domains of clinical competence as defined by the Accreditation

1 Council on Graduate Medical Education and American Board of Medical Specialties pertaining to
2 Respondent's current or intended area of practice. The program shall take into account data
3 obtained from the pre-assessment, self-report forms and interview, and the Decision(s),
4 Accusation(s), and any other information that the Board or its designee deems relevant. The
5 program shall require Respondent's on-site participation for a minimum of three (3) and no more
6 than five (5) days as determined by the program for the assessment and clinical education
7 evaluation. Respondent shall pay all expenses associated with the clinical competence
8 assessment program.

9 At the end of the evaluation, the program will submit a report to the Board or its designee
10 which unequivocally states whether the Respondent has demonstrated the ability to practice
11 safely and independently. Based on Respondent's performance on the clinical competence
12 assessment, the program will advise the Board or its designee of its recommendation(s) for the
13 scope and length of any additional educational or clinical training, evaluation or treatment for any
14 medical condition or psychological condition, or anything else affecting Respondent's practice of
15 medicine. Respondent shall comply with the program's recommendations.

16 Determination as to whether Respondent successfully completed the clinical competence
17 assessment program is solely within the program's jurisdiction.

18 If Respondent fails to enroll, participate in, or successfully complete the clinical
19 competence assessment program within the designated time period, Respondent shall receive a
20 notification from the Board or its designee to cease the practice of medicine within three (3)
21 calendar days after being so notified. The Respondent shall not resume the practice of medicine
22 until enrollment or participation in the outstanding portions of the clinical competence assessment
23 program have been completed. If the Respondent did not successfully complete the clinical
24 competence assessment program, the Respondent shall not resume the practice of medicine until a
25 final decision has been rendered on the accusation and/or a petition to revoke probation. The
26 cessation of practice shall not apply to the reduction of the probationary time period.

27 Within sixty (60) days after Respondent has successfully completed the clinical competence
28 assessment program, Respondent shall participate in a professional enhancement program

1 approved in advance by the Board or its designee, which shall include quarterly chart review,
2 semi-annual practice assessment, and semi-annual review of professional growth and education.
3 Respondent shall participate in the professional enhancement program at Respondent's expense
4 during the term of probation, or until the Board or its designee determines that further
5 participation is no longer necessary.

6 5. MONITORING - PRACTICE/BILLING. Within thirty (30) calendar days of the
7 effective date of the Decision, Respondent shall submit to the Board or its designee for prior
8 approval as a practice monitor(s), the name and qualifications of one or more licensed physicians
9 and surgeons whose licenses are valid and in good standing, and who are preferably American
10 Board of Medical Specialties (ABMS) certified. A monitor shall have no prior or current
11 business or personal relationship with Respondent, or other relationship that could reasonably be
12 expected to compromise the ability of the monitor to render fair and unbiased reports to the
13 Board, including but not limited to any form of bartering, shall be in Respondent's field of
14 practice, and must agree to serve as Respondent's monitor. Respondent shall pay all monitoring
15 costs.

16 The Board or its designee shall provide the approved monitor with copies of the
17 Decision(s), and a proposed monitoring plan. Within fifteen (15) calendar days of receipt of the
18 Decision(s), and proposed monitoring plan, the monitor shall submit a signed statement that the
19 monitor has read the Decision(s) and Accusation(s), fully understands the role of a monitor, and
20 agrees or disagrees with the proposed monitoring plan. If the monitor disagrees with the
21 proposed monitoring plan, the monitor shall submit a revised monitoring plan with the signed
22 statement for approval by the Board or its designee.

23 Within sixty (60) calendar days of the effective date of the Decision, and continuing
24 throughout probation, Respondent's practice shall be monitored by the approved monitor.
25 Respondent shall make all records available for immediate inspection and copying on the
26 premises by the monitor at all times during business hours and shall retain the records for the
27 entire term of probation.

28 If Respondent fails to obtain approval of a monitor within sixty (60) calendar days of the

1 effective date of the Decision, Respondent shall receive a notification from the Board or its
2 designee to cease the practice of medicine within three (3) calendar days after being so notified.
3 Respondent shall cease the practice of medicine until a monitor is approved to provide monitoring
4 responsibility.

5 The monitor(s) shall submit a quarterly written report to the Board or its designee which
6 includes an evaluation of Respondent's performance, indicating whether Respondent's practices
7 are within the standards of practice of medicine, and whether Respondent is practicing medicine
8 safely, billing appropriately or both. It shall be the sole responsibility of Respondent to ensure
9 that the monitor submits the quarterly written reports to the Board or its designee within ten (10)
10 calendar days after the end of the preceding quarter.

11 If the monitor resigns or is no longer available, Respondent shall, within 5 calendar days of
12 such resignation or unavailability, submit to the Board or its designee, for prior approval, the
13 name and qualifications of a replacement monitor who will be assuming that responsibility within
14 fifteen (15) calendar days. If Respondent fails to obtain approval of a replacement monitor within
15 sixty (60) calendar days of the resignation or unavailability of the monitor, Respondent shall
16 receive a notification from the Board or its designee to cease the practice of medicine within three
17 (3) calendar days after being so notified. Respondent shall cease the practice of medicine until a
18 replacement monitor is approved and assumes monitoring responsibility.

19 In lieu of a monitor, Respondent may participate in a professional enhancement program
20 approved in advance by the Board or its designee that includes, at minimum, quarterly chart
21 review, semi-annual practice assessment, and semi-annual review of professional growth and
22 education. Respondent shall participate in the professional enhancement program at Respondent's
23 expense during the term of probation.

24 6. SOLO PRACTICE PROHIBITION. Respondent is prohibited from engaging in the
25 solo practice of medicine. Prohibited solo practice includes, but is not limited to, a practice
26 where: 1) Respondent merely shares office space with another physician but is not affiliated for
27 purposes of providing patient care, or 2) Respondent is the sole physician practitioner at that
28 location.

1 If Respondent fails to establish a practice with another physician or secure employment in
2 an appropriate practice setting within sixty (60) calendar days of the effective date of the
3 Decision, Respondent shall receive a notification from the Board or its designee to cease the
4 practice of medicine within three (3) calendar days after being so notified. The Respondent shall
5 not resume practice until an appropriate practice setting is established.

6 If, during the course of the probation, the Respondent's practice setting changes and the
7 Respondent is no longer practicing in a setting in compliance with the Decision, the Respondent
8 shall notify the Board or its designee within five (5) calendar days of the practice setting change.
9 If Respondent fails to establish a practice with another physician or secure employment in an
10 appropriate practice setting within sixty (60) calendar days of the practice setting change,
11 Respondent shall receive a notification from the Board or its designee to cease the practice of
12 medicine within three (3) calendar days after being so notified. The Respondent shall not resume
13 practice until an appropriate practice setting is established.

14 7. NOTIFICATION. Within seven (7) days of the effective date of this Decision, the
15 Respondent shall provide a true copy of this Decision and Accusation to the Chief of Staff or the
16 Chief Executive Officer at every hospital where privileges or membership are extended to
17 Respondent, at any other facility where Respondent engages in the practice of medicine,
18 including all physician and locum tenens registries or other similar agencies, and to the Chief
19 Executive Officer at every insurance carrier which extends malpractice insurance coverage to
20 Respondent. Respondent shall submit proof of compliance to the Board or its designee within
21 fifteen (15) calendar days.

22 This condition shall apply to any change(s) in hospitals, other facilities or insurance carrier.

23 8. SUPERVISION OF PHYSICIAN ASSISTANTS AND ADVANCED PRACTICE
24 NURSES. During probation, Respondent is prohibited from supervising physician assistants and
25 advanced practice nurses.

26 9. OBEY ALL LAWS. Respondent shall obey all federal, state and local laws, all rules
27 governing the practice of medicine in California and remain in full compliance with any court
28 ordered criminal probation, payments, and other orders.

1 10. QUARTERLY DECLARATIONS. Respondent shall submit quarterly declarations
2 under penalty of perjury on forms provided by the Board, stating whether there has been
3 compliance with all the conditions of probation.

4 Respondent shall submit quarterly declarations not later than ten (10) calendar days after
5 the end of the preceding quarter.

6 11. GENERAL PROBATION REQUIREMENTS.

7 Compliance with Probation Unit

8 Respondent shall comply with the Board's probation unit.

9 Address Changes

10 Respondent shall, at all times, keep the Board informed of Respondent's business and
11 residence addresses, email address (if available), and telephone number. Changes of such
12 addresses shall be immediately communicated in writing to the Board or its designee. Under no
13 circumstances shall a post office box serve as an address of record, except as allowed by Business
14 and Professions Code section 2021(b).

15 Place of Practice

16 Respondent shall not engage in the practice of medicine in Respondent's or patient's place
17 of residence, unless the patient resides in a skilled nursing facility or other similar licensed
18 facility.

19 License Renewal

20 Respondent shall maintain a current and renewed California physician's and surgeon's
21 license.

22 Travel or Residence Outside California

23 Respondent shall immediately inform the Board or its designee, in writing, of travel to any
24 areas outside the jurisdiction of California which lasts, or is contemplated to last, more than thirty
25 (30) calendar days.

26 In the event Respondent should leave the State of California to reside or to practice,
27 Respondent shall notify the Board or its designee in writing thirty (30) calendar days prior to the
28 dates of departure and return.

1 12. INTERVIEW WITH THE BOARD OR ITS DESIGNEE. Respondent shall be
2 available in person upon request for interviews either at Respondent's place of business or at the
3 probation unit office, with or without prior notice throughout the term of probation.

4 13. NON-PRACTICE WHILE ON PROBATION. Respondent shall notify the Board or
5 its designee in writing within fifteen (15) calendar days of any periods of non-practice lasting
6 more than thirty (30) calendar days and within fifteen (15) calendar days of Respondent's return
7 to practice. Non-practice is defined as any period of time Respondent is not practicing medicine
8 as defined in Business and Professions Code sections 2051 and 2052 for at least forty (40) hours
9 in a calendar month in direct patient care, clinical activity or teaching, or other activity as
10 approved by the Board. If Respondent resides in California and is considered to be in non-
11 practice, Respondent shall comply with all terms and conditions of probation. All time spent in
12 an intensive training program which has been approved by the Board or its designee shall not be
13 considered non-practice and does not relieve Respondent from complying with all the terms and
14 conditions of probation. Practicing medicine in another state of the United States or Federal
15 jurisdiction while on probation with the medical licensing authority of that state or jurisdiction
16 shall not be considered non-practice. A Board-ordered suspension of practice shall not be
17 considered as a period of non-practice.

18 In the event Respondent's period of non-practice while on probation exceeds eighteen (18)
19 calendar months, Respondent shall successfully complete the Federation of State Medical Boards'
20 Special Purpose Examination, or, at the Board's discretion, a clinical competence assessment
21 program that meets the criteria of Condition 18 of the current version of the Board's "Manual of
22 Model Disciplinary Orders and Disciplinary Guidelines" prior to resuming the practice of
23 medicine.

24 Respondent's period of non-practice while on probation shall not exceed two (2) years.

25 Periods of non-practice will not apply to the reduction of the probationary term.

26 Periods of non-practice for a Respondent residing outside of California will relieve
27 Respondent of the responsibility to comply with the probationary terms and conditions with the
28 exception of this condition and the following terms and conditions of probation: Obey All Laws;

1 General Probation Requirements; Quarterly Declarations; Abstain from the Use of Alcohol and/or
2 Controlled Substances; and Biological Fluid Testing.

3 14. COMPLETION OF PROBATION. Respondent shall comply with all financial
4 obligations (e.g., restitution, probation costs) not later than one hundred twenty (120) calendar
5 days prior to the completion of probation. Upon successful completion of probation,
6 Respondent's certificate shall be fully restored.

7 15. VIOLATION OF PROBATION. Failure to fully comply with any term or condition
8 of probation is a violation of probation. If Respondent violates probation in any respect, the
9 Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and
10 carry out the disciplinary order that was stayed. If an Accusation, or Petition to Revoke Probation,
11 or an Interim Suspension Order is filed against Respondent during probation, the Board shall have
12 continuing jurisdiction until the matter is final, and the period of probation shall be extended until
13 the matter is final.

14 16. LICENSE SURRENDER. Following the effective date of this Decision, if
15 Respondent ceases practicing due to retirement or health reasons or is otherwise unable to satisfy
16 the terms and conditions of probation, Respondent may request to surrender his or her license.
17 The Board reserves the right to evaluate Respondent's request and to exercise its discretion in
18 determining whether or not to grant the request, or to take any other action deemed appropriate
19 and reasonable under the circumstances. Upon formal acceptance of the surrender, Respondent
20 shall within fifteen (15) calendar days deliver Respondent's wallet and wall certificate to the
21 Board or its designee and Respondent shall no longer practice medicine. Respondent will no
22 longer be subject to the terms and conditions of probation. If Respondent re-applies for a medical
23 license, the application shall be treated as a petition for reinstatement of a revoked certificate.


24 17. PROBATION MONITORING COSTS. Respondent shall pay the costs associated
25 with probation monitoring each and every year of probation, as designated by the Board, which
26 may be adjusted on an annual basis. Such costs shall be payable to the Medical Board of
27 California and delivered to the Board or its designee no later than January 31 of each calendar
28 year.

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DATED:

Harpre

DATED:


JOHN FLEER
Attorney for Respondent

Dated:

XAVIER BECERRA
Attorney General of California
JANE ZACK SIMON
Supervising Deputy Attorney General

STIPULATED SETTLEMENT (800-2014-003236)

Exhibit A

Accusation No. 800-2014-003236

1 XAVIER BECERRA
Attorney General of California
2 JANE ZACK SIMON
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Attorneys for Complainant

7
8 BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
9 STATE OF CALIFORNIA

10 In the Matter of the Accusation Against:

Case No. 800-2014-003236

11 Ravi Sham Panjabi, M.D.
12 19850 Lake Chabot Road
13 Castro Valley, CA 94546

ACCUSATION

14 Physician's and Surgeon's Certificate
No. A 55600,

15 Respondent.

16
17 Complainant alleges:

18 PARTIES

19 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
20 capacity as the Executive Director of the Medical Board of California, Department of Consumer
21 Affairs (Board).

22 2. On January 31, 1996, the Medical Board issued Physician's and Surgeon's Certificate
23 Number A 55600 to Ravi Sham Panjabi, M.D. (Respondent). The Physician's and Surgeon's
24 Certificate was in full force and effect at all times relevant to the charges brought herein and will
25 expire on October 31, 2017, unless renewed.

26 JURISDICTION

27 3. This Accusation is brought before the Board, under the authority of the following
28 laws. All section references are to the Business and Professions Code unless otherwise indicated.

1 4. Section 2004 of the Code states, in pertinent part:

2 "The board shall have the responsibility for the following:

3 "(a) The enforcement of the disciplinary and criminal provisions of the Medical Practice
4 Act.

5 "(b) The administration and hearing of disciplinary actions.

6 "(c) Carrying out disciplinary actions appropriate to findings made by a panel or an
7 administrative law judge.

8 "(d) Suspending, revoking, or otherwise limiting certificates after the conclusion of
9 disciplinary actions.

10 "(e) Reviewing the quality of medical practice carried out by physician and surgeon
11 certificate holders under the jurisdiction of the board.

12 "... "

13 5. Section 2227 of the Code provides that a licensee who is found guilty under the
14 Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
15 one year, placed on probation and required to pay the costs of probation monitoring, be publicly
16 reprimanded, or such other action taken in relation to discipline as the Board deems proper.

17 6. Section 2234 of the Code, states, in pertinent part:

18 "The board shall take action against any licensee who is charged with unprofessional
19 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
20 limited to, the following:

21 "(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
22 violation of, or conspiring to violate any provision of this chapter.

23 "....

24 "(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
25 omissions. An initial negligent act or omission followed by a separate and distinct departure from
26 the applicable standard of care shall constitute repeated negligent acts.

27 "(1) An initial negligent diagnosis followed by an act or omission medically appropriate
28 for that negligent diagnosis of the patient shall constitute a single negligent act.

“(2) When the standard of care requires a change in the diagnosis, act, or omission that constitutes the negligent act described in paragraph (1), including, but not limited to, a reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the applicable standard of care, each departure constitutes a separate and distinct breach of the standard of care.

“ ”

7. Section 2266 of the Code states: "The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct."

FACTS

8. At all times relevant to this matter, Respondent was licensed and practicing medicine in California.

PATIENT P-1¹

9. Respondent first saw Patient P-1, a then 82 year old woman, in June 2013. She was referred to Respondent for trigger point injections for shoulder pain.

10. P-1 was seen by Respondent or his physician assistant on at least nine occasions between June 3, 2013 and her last visit on November 19, 2013. Respondent treated P-1's pain with physical therapy, nortriptyline, trigger point injections, and intercostal injections.

11. The notes documenting P-1's physical examination in Respondent's medical records for her are nearly identical for all visits.

12. P-1 had been treated at Alta Bates Medical Center for lung cancer and had a right lobectomy in July 2012. Respondent did not document consultation with P-1's oncologist or her other treating physicians and did not obtain medical information about her cancer history or current medical condition.

¹ The patients are designated in this document as Patients P-1 and P-2 to protect their privacy. Respondent knows the names of the patients and can confirm their identities through discovery.

1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Repeated Negligent Acts, Inadequate Records)**

3 13. Respondent is guilty of unprofessional conduct and subject to disciplinary action
4 under section 2234, subdivision (c) (repeated negligent acts), of the Code and/or section 2266
5 (inadequate records) of the Code in that Respondent engaged in the conduct described above
6 including, but not limited to, the following:

7 A. Respondent did not adequately document detailed physical examinations of P-1.

8 B. Respondent failed to obtain medical information concerning P-1's cancer history and
9 her current condition.

10 **PATIENT P-2**

11 14. Respondent first saw Patient P-2, a then 62 year old woman, in or about July 2011.
12 She was referred to Respondent for pain management by her primary care physician.

13 15. P-2 was seen by Respondent or his physician assistant on at least 28 occasions
14 between July 2011 and her last visit on November 24, 2014. Respondent treated P-2's pain with
15 opioid medications and benzodiazepines.

16 16. Respondent's medical records for P-2 lack documented attempts to communicate with
17 or obtain medical records from P-2's other providers and any documentation concerning co-
18 morbidities associated with chronic illness such as psychological illnesses.

19 17. Respondent did not document consideration of referring P-2 to a psychiatrist for
20 consultation to evaluate possible co-morbidities of depression and the possibility that opioids
21 might contribute to depression.

22 **SECOND CAUSE FOR DISCIPLINE**

23 **(Repeated Negligent Acts, Inadequate Records)**

24 18. Respondent is guilty of unprofessional conduct and subject to disciplinary action
25 under section 2234, subdivision (c) (repeated negligent acts), of the Code and/or section 2266
26 (inadequate records) of the Code in that Respondent engaged in the conduct described above
27 including, but not limited to, the following:
28

1 A. Respondent failed to perform and document an adequate patient evaluation of P-2 in
2 that he failed to document any attempts to communicate with or obtain medical records from P-
3 2's other providers and any potential co-morbidities associated with chronic illness such as
4 psychological illnesses.

5 B. Respondent failed to document consideration of referring P-2 to a psychiatrist for
6 consultation to evaluate possible co-morbidities of depression and the possibility that opioids
7 might contribute to depression.

8 **PRAYER**

9 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
10 and that following the hearing, the Medical Board of California issue a decision:

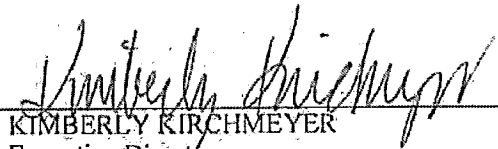
11 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 55600,
12 issued to Ravi Sham Panjabi, M.D.;

13 2. Revoking, suspending or denying approval of Ravi Sham Panjabi, M.D.'s authority to
14 supervise physician assistants, pursuant to section 3527 of the Code;

15 3. Ordering Ravi Sham Panjabi, M.D., if placed on probation, to pay the Board the costs
16 of probation monitoring; and

17 4. Taking such other and further action as deemed necessary and proper.

18
19 DATED: February 10, 2017


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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